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SCHEDULE B (FEC Form 3X)	Use sepa			FOR LIN		NUMBER:				PAGE 568 / 589						
ITEMIZED DISBURSEMENTS	for each of Detailed S		F	21b 27	H	22 28a	X	23 28b	F	24 28c		25 29	П	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														;		
NAME OF COMMITTEE (In Full)  AMERICAN FEDERATION OF STATE CO	JNTY & M	MUNICIPAL EN	/IPL	0	YEES	PΕ	O P	LΕ								
Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARROW							Transaction ID: SB23.176839 Date of Disbursement  D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
Mailing Address P.O. Box 8166																
,	State GA	Zip Code 31412					Amou	nt o	f Each	D	isburse	-	-	-	d	
Purpose of Disbursement Contribution					11			0				50	00.00			
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Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS							Transaction ID: SB23.176801 Date of Disbursement									
Mailing Address P.O. Box 23940							0 9	М	<sup>′</sup>	3 (		ž	0 1 C	) <sup>Y</sup>		
,	State CA	Zip Code 93121					Amou	nt o	f Each	D	isburse	men	t this f	Perio	d	
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Full Name (Last, First, Middle Initial)											SB23.	176	796			
FRIENDS OF TIM JOHNSON  Mailing Address P.O. Box 17097							Date of	of Di		en ) E		ž	0 Ĭ (	) <sup>Y</sup>		
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SUBTOTAL of Disbursements This Page (optional) .					. •							700	00.00			

TOTAL This Period (last page this line number only) .....